

1. Work requester fills out this section.

☐ Standing Work Permit

Requester: Don Lynch	Date: 09/12/05	Ext.: 2253	Dept/Div/Group: PO/PHENIX
Other Contact person (if different from requester): S. Marino			Ext.: 3704
Work Control Coordinator: Don Lynch		Start Date: 09/13/05	Est. End Date: 09/30/05
Brief Description of Work: Repair and/or replace failed FEE electronics in South Muon Magnet Sector 3 Octant 3			
Building: 1008	Room: IR	Equipment: n/a	Service Provider: PHENIX

WCC, Requester/Designee, Service Provider, and ES&H (as necessary) fill out this section or attach analysis

<b>ES&amp;H ANALYSIS</b>				
<b>Radiation Concerns</b>	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Activation	<input type="checkbox"/> Airborne	<input type="checkbox"/> Contamination
	<input type="checkbox"/> Radiation			
Radiation Generating Devices:	<input type="checkbox"/> Radiography	<input type="checkbox"/> Moisture Density Gauges	<input type="checkbox"/> Soil Density Gauges	<input type="checkbox"/> X-ray Equipment
<input type="checkbox"/> Special nuclear materials involved, notify Isotope Special Materials Group		<input type="checkbox"/> Fissionable materials involved, notify Laboratory Criticality Officer		
<b>Safety Concerns</b>	<input type="checkbox"/> None	<input type="checkbox"/> Ergonomics	<input type="checkbox"/> Transport of Haz/Rad Material	
<input type="checkbox"/> Adding/Removing Walls or Roofs	<input type="checkbox"/> Confined Space*	<input type="checkbox"/> Explosives	<input type="checkbox"/> Lead*	<input type="checkbox"/> Penetrating Fire Walls
	<input type="checkbox"/> Corrosive	<input type="checkbox"/> Flammable	<input type="checkbox"/> Magnetic Field*	<input type="checkbox"/> Pressurized Systems
<input type="checkbox"/> Asbestos*	<input type="checkbox"/> Cryogenic	<input type="checkbox"/> Fumes/Mist/Dust*	<input type="checkbox"/> Material Handling	<input type="checkbox"/> Rigging/Critical Lift
<input type="checkbox"/> Beryllium*	<input type="checkbox"/> Electrical	<input type="checkbox"/> Heat/Cold Stress	<input type="checkbox"/> Noise*	<input type="checkbox"/> Toxic Materials*
<input type="checkbox"/> Biohazard*	<input checked="" type="checkbox"/> Elevated Work*	<input type="checkbox"/> Hydraulic	<input type="checkbox"/> Non-ionizing Radiation*	<input type="checkbox"/> Vacuum
<input type="checkbox"/> Chemicals*	<input type="checkbox"/> Excavation	<input type="checkbox"/> Lasers*	<input type="checkbox"/> Oxygen Deficiency*	<input type="checkbox"/> Other
* Does this work require medical clearance or surveillance from the Occupational Medicine Clinic? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>Environmental Concerns</b>	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Work impacts Environmental Permit No.		
<input type="checkbox"/> Atmospheric Discharges (rad/non-rad)	<input type="checkbox"/> Land Use	<input type="checkbox"/> Soil Activation/contamination	<input type="checkbox"/> Waste-Mixed	
<input type="checkbox"/> Chemical or Rad Material Storage or Use	<input type="checkbox"/> Liquid Discharges	<input type="checkbox"/> Waste-Clean	<input type="checkbox"/> Waste-Radioactive	
<input type="checkbox"/> Cesspools (UIC)	<input type="checkbox"/> Oil/PCB Management	<input type="checkbox"/> Waste-Hazardous	<input type="checkbox"/> Waste-Regulated Medical	
<input type="checkbox"/> High water/power consumption	<input type="checkbox"/> Spill potential	<input type="checkbox"/> Waste-Industrial	<input type="checkbox"/> Underground Duct/Piping	
Waste disposition by: <input type="checkbox"/> Other				
<b>Pollution Prevention (P2)/Waste Minimization Opportunity:</b>	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Yes		
<b>FACILITY CONCERNS</b>	<input checked="" type="checkbox"/> None			
<input type="checkbox"/> Access/Egress Limitations	<input type="checkbox"/> Electrical Noise	<input type="checkbox"/> Potential to Cause a False Alarm	<input type="checkbox"/> Vibrations	
	<input type="checkbox"/> Impacts Facility Use Agreement	<input type="checkbox"/> Temperature Change	<input type="checkbox"/> Other	
<input type="checkbox"/> Configuration Control	<input type="checkbox"/> Maintenance Work on Ventilation Systems	<input type="checkbox"/> Utility Interruptions		
<b>WORK CONTROLS</b>				
<b>Work Practices</b>				
<input type="checkbox"/> None	<input type="checkbox"/> Exhaust Ventilation	<input checked="" type="checkbox"/> Lockout/Tagout	<input type="checkbox"/> Spill Containment	<input type="checkbox"/> Security (see Instruction Sheet)
<input checked="" type="checkbox"/> Back-up Person/Watch	<input type="checkbox"/> HP Coverage	<input type="checkbox"/> Posting/Warning Signs	<input type="checkbox"/> Time Limitation	<input type="checkbox"/> Other
<input type="checkbox"/> Barricades	<input type="checkbox"/> IH Survey	<input type="checkbox"/> Scaffolding-requires inspection	<input type="checkbox"/> Warning Alarm (i.e. "high level")	
<b>Protective Equipment</b>				
<input type="checkbox"/> None	<input type="checkbox"/> Ear Plugs	<input type="checkbox"/> Gloves	<input type="checkbox"/> Lab Coat	<input type="checkbox"/> Safety Glasses
<input type="checkbox"/> Coveralls	<input type="checkbox"/> Ear Muffs	<input type="checkbox"/> Goggles	<input type="checkbox"/> Respirator	<input checked="" type="checkbox"/> Safety Harness
<input type="checkbox"/> Disposable Clothing	<input type="checkbox"/> Face Shield	<input type="checkbox"/> Hard Hat	<input type="checkbox"/> Shoe Covers	<input checked="" type="checkbox"/> Safety Shoes <input type="checkbox"/> Other
<b>Permits Required (Permits must be valid when job is scheduled.)</b>				
<input checked="" type="checkbox"/> None	<input type="checkbox"/> Cutting/Welding	<input type="checkbox"/> Impair Fire Protection Systems		
<input type="checkbox"/> Concrete/Masonry Penetration	<input type="checkbox"/> Digging/Core Drilling	<input type="checkbox"/> Rad Work Permit-RWP No		
<input type="checkbox"/> Confined Space Entry	<input type="checkbox"/> Electrical Working Hot	<input type="checkbox"/> Other		
<b>Dosimetry/Monitoring</b>				
<input checked="" type="checkbox"/> None	<input type="checkbox"/> Heat Stress Monitor	<input type="checkbox"/> Real Time Monitor	<input type="checkbox"/> TLD	
<input type="checkbox"/> Air Effluent	<input type="checkbox"/> Noise Survey/Dosimeter	<input type="checkbox"/> Self-reading Pencil Dosimeter	<input type="checkbox"/> Waste Characterization	
<input type="checkbox"/> Ground Water	<input type="checkbox"/> O <sub>2</sub> /Combustible Gas	<input type="checkbox"/> Self-reading Digital Dosimeter	<input type="checkbox"/> Other	
<input type="checkbox"/> Liquid Effluent	<input type="checkbox"/> Passive Vapor Monitor	<input type="checkbox"/> Sorbent Tube/Filter Pump		
<b>Training Requirements (List below specific training requirements)</b>				
PHENIX Awareness, LOTO affected, RHIC Access, working at heights,				
<b>Based on analysis above, the Walkdown Team determines the risk, complexity, and coordination ratings below:</b>			<b>If using the permit when all hazard ratings are low, only the following need to sign: ( Although allowed, there is no need to use back of form)</b>	
<b>ES&amp;H Risk Level:</b>	<input type="checkbox"/> Low	<input checked="" type="checkbox"/> Moderate	<input type="checkbox"/> High	WCC: _____ Date: _____
<b>Complexity Level:</b>	<input type="checkbox"/> Low	<input checked="" type="checkbox"/> Moderate	<input type="checkbox"/> High	Service Provider: _____ Date: _____
<b>Work Coordination:</b>	<input type="checkbox"/> Low	<input checked="" type="checkbox"/> Moderate	<input type="checkbox"/> High	Authorization to start _____ Date: _____
(Departmental Sup/WCC/Designee)				

3. Both work requester and service provider contribute to work plan (use attachments for detailed plans)

<b>Work Plan</b> (procedures, timing, equipment, and personnel availability need to be addressed): See attached procedure.				
Special Working Conditions Required: No				
Operational Limits Imposed: No				
Post Work Testing Required:				
Job Safety Analysis Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Walkdown Required: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Reviewed by:</b> Primary Reviewer will determine the size of the review team and the other signatures required based on hazards and job complexity. Primary Reviewer signature means that the hazards and risks that could impact ES&H have been identified and will be controlled according to BNL requirements.				
<b>Title</b>	<b>Name (print)</b>	<b>Signature</b>	<b>Life #</b>	<b>Date</b>
Primary Reviewer				
ES&H Professional				
Other				
Other				
Work Control Coordinator	Don Lynch		20146	9/12/2005
Service Provider				
	Review Done: <input type="checkbox"/> in series <input type="checkbox"/> team			

**4. Job site personnel fill out this section.**

Note: Signature indicates personnel performing work have read and understand the hazards and permit requirements (including any attachments).			
Job Supervisor:		Contractor Supervisor:	
Workers:	Life#:	Workers :	Life#:
Workers are encouraged to provide feedback on ES&H concerns or on ideas for improved job work flow. Use feedback form or space below.			

**5. Departmental Job Supervisor, Work Control Coordinator/Designee**

Conditions are appropriate to start work: (Permit has been reviewed, work controls are in place and site is ready for job.)			
Name:	Signature:	Life#:	Date:

**6. Departmental Job Supervisor, Work Requester/Designee determines if Post Job Review is required.** ☐ Yes ☐ No

Post Job Review (Fill in names of reviewers)			
Name:	Signature:	Life#:	Date:
Name:	Signature:	Life#:	Date:

**7. Worker provides feedback.**

Worker Feedback (use attached sheets as necessary)	
a) WCM/WCC: Is any feedback required? <input type="checkbox"/> Yes <input type="checkbox"/> No	
b) Workers: Are there better methods or safer ways to perform this job in the future? <input type="checkbox"/> Yes <input type="checkbox"/> No	

**8. Closeout: Work Control Coordinator (authorizing dept.) checks quality of completed permit and ensures the work site is left in an acceptable condition. (WCC can delegate clean up of work area to work supervisor)**

Name:	Signature:	Life#:	Date:
Comments:			

**Repair and/or replace Station 3 Octant 3 FEM's inside South Muon Magnet in PHENIX IR, Bldg. 1008****Discussion**

The Front End Electronics boards (FEE) for the Muon Tracker Detectors (MuTr) are located in various areas inside the North (MMN) and South Muon Magnets (MMN) in the PHENIX IR. The specific electronics to be repaired under this work plan are located under the top steel shield ("lampshade") in the MMS. These electronics are contained in printed circuit cards in metal boxes attached to the internal support structure for the MMS. These cards cannot be accessed from inside the MMS because of their location (height) and the lack of internal access provisions. The addition of the new Central Magnet ("bridge") platform in the PHENIX IR and its proximity to the "eyebrow" platform above the MMS now allows for a short platform to be suspended from the deck structure of these 2 rack platforms thus allowing access to the electronics requiring repair/replacement.

This work is to be done by fully trained and experienced PHENIX personnel, under the supervision of Sal Marino. The platform is an existing purchased work platform manufactured by Werner, Inc. rated for 500 lbs. This platform will not be modified in any way and will be supported by 2 steel hangers. Access to the Werner platform will be provided via a 6 ft A-frame ladder on the Werner platform secured to the bridge platform. (See attached sketch)

After the platform and hangers are installed, the actual repairs will be performed by PHENIX MuTr experts with assistance from PHENIX mechanical and electrical technicians as necessary. All persons involved will have appropriate training for working at heights, fall protection and all other relevant training.

**Procedure**

LOTO the power to the MMS magnet coil at the power supply in 1008B. (Pearson)

Verify that no gas is flowing to the chambers. (Biggs)

Remove the top lampshade from the MMS (Pearson)

Position the MMS and CM so that the platforms are separated by 29 inches horizontally, then assure that both the MMS and the CM are locked in position by locking out the hydraulics to each magnet mover. (Marino)

Place the Werner platform onto the hangers and position it such that the 2 hangers are equidistant from the center of the platform and over existing holes in platform I-

beams as close to the end of the platform as possible. Match drill the steel hangers for 1/4-20 threaded rod, then attach the hangers to the platform with 1/4 -20 threaded rod running through these holes under the platform and through both uprights of the steel hanger. Install speed rails on the North side in the brackets provided on the Werner platform, with 2 horizontal bars equally spaced to achieve less than 24" separation for any horizontal space and secure with locking screws. Attach the steel straps to the 8 foot long channels using bolts as shown in the sketch to assure that the vertical load is transferred from the straps to a point above the toe plates on the channels. Attach horizontal spreader bars to the straps perpendicular to the long edge of the platform at a height just below the bridge toe plate. (Marino)

Using the IR crane, carefully lift the platform/hanger assembly above the gap between the CM and the MMS platforms. Hook the straps over the platform so that the 6 inch channels sit firmly on the eyebrow and bridge decking as appropriate. Secure the bridge side channel to the decking by clamping at 2 points to the Bridge frame. (Marino)

Once the platform is in place the crane hook shall be positioned directly above the mid point of the platform (for personnel tie-off fall protection) then locked out. (Marino/Pearson)

Position the ladder mid way on the Werner platform and attach at the top by unistrut I-beam clamps to the Bridge toe plate.

The MuTr experts and technician assistants must use fall protection harnesses with retractable lanyards at all times when installing, accessing and/or working on the Werner platform. The harnesses shall be secured to the crane hook. (MuTr experts, PHENIX technicians)

At this point the platform should be checked for rigidity. Use unistrut clamps to secure the Werner platform to the adjacent MMS superstructure. (Marino)

After the platform is installed but before any work is attempted from the platform, it must be inspected by a CA safety representative.

No more than 2 properly trained persons may work on the Werner platform at the same time, and no less than 2 properly trained persons may be present (watch person) when anyone is working by himself (herself) on the Werner Platform.

**CAUTION Remove all unnecessary objects from pockets before performing any work on the platform to prevent accidental dropping of objects. All tools shall be secured before accessing the work platform.**

**When removing electronic cards from their enclosures, extreme caution shall be maintained to prevent any accidental loss of hardware into the MMS.**

After repairs are completed the Electronics boxes shall be closed and the Werner platform removed in the reverse sequence indicated above.

After the platform is removed the top lampshade shall be reinstalled as soon as possible.

**Analyses:**

The platform will be prevented from swinging by the rigidity of the  $\frac{1}{4}$  steel U bracket which attaches the platform to the eyebrow and bridge.

The platform is rated for 500lbs.

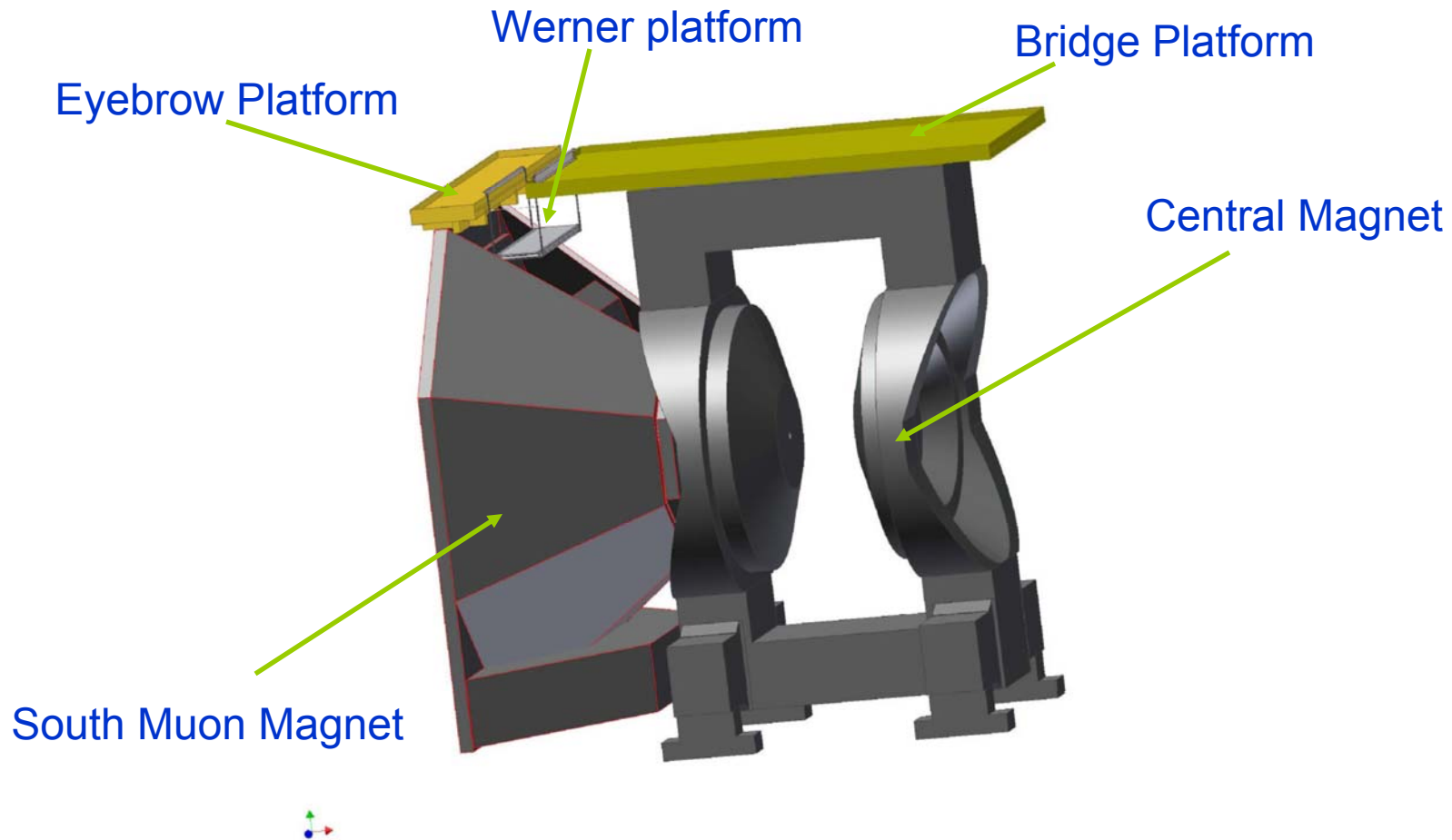
The steel u-brackets have a combined cross section of  $2.00 \text{ in}^2$ . Taking the most conservative assumption that all of the load is concentrated on 1 of the 4 bracket arms, the cross section area is  $0.5 \text{ in}^2$  and the maximum stress is

$$500/.5 = 1000 \text{ psi}$$

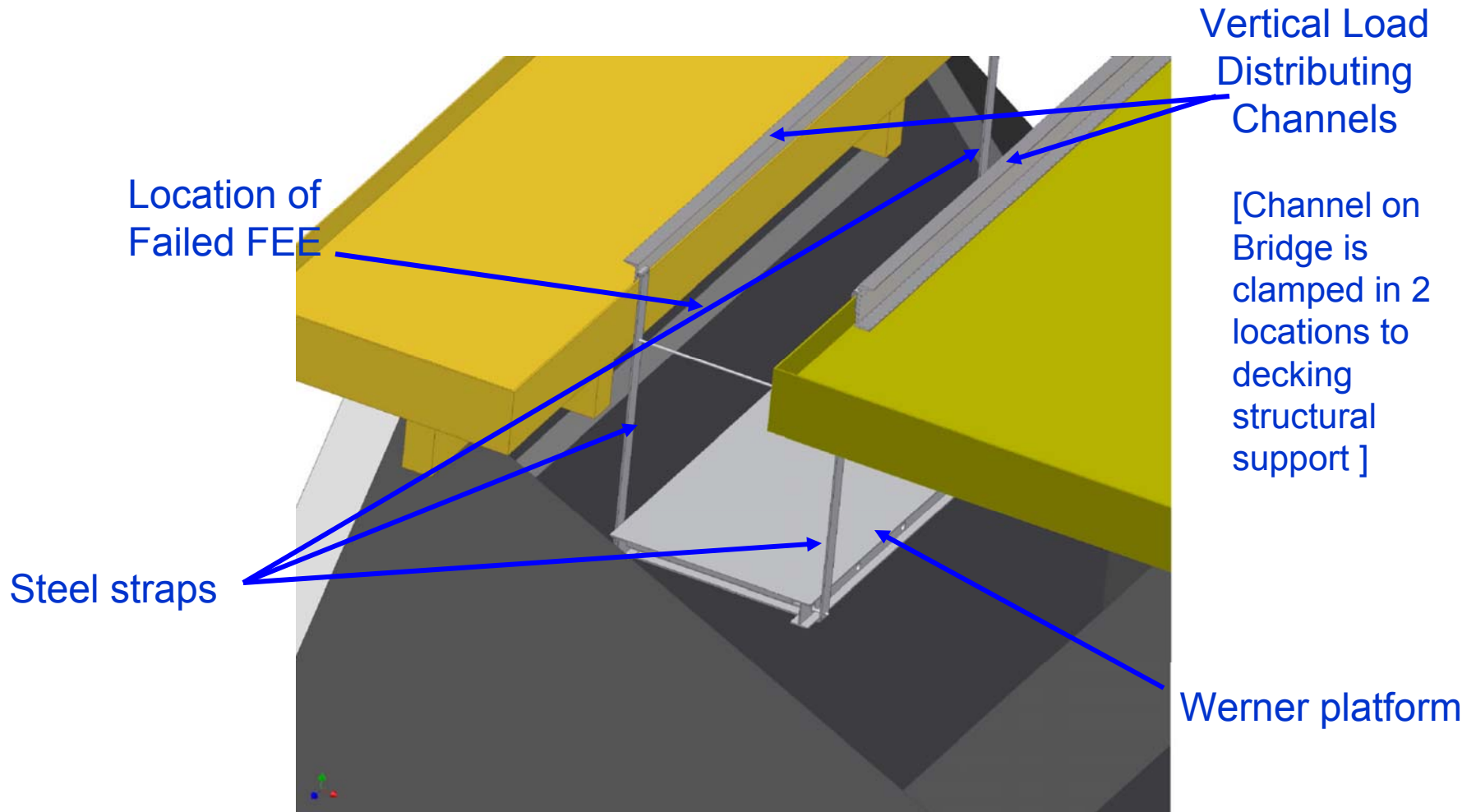
With a yield stress for cold rolled carbon steel of at least 30,000 psi, the safety factor for the brackets is at least 30.

All other load bearing members are pre-rated for loads well in excess of the requirements for this effort.

# MuTr Octant 3 Sector 3 Access Platform



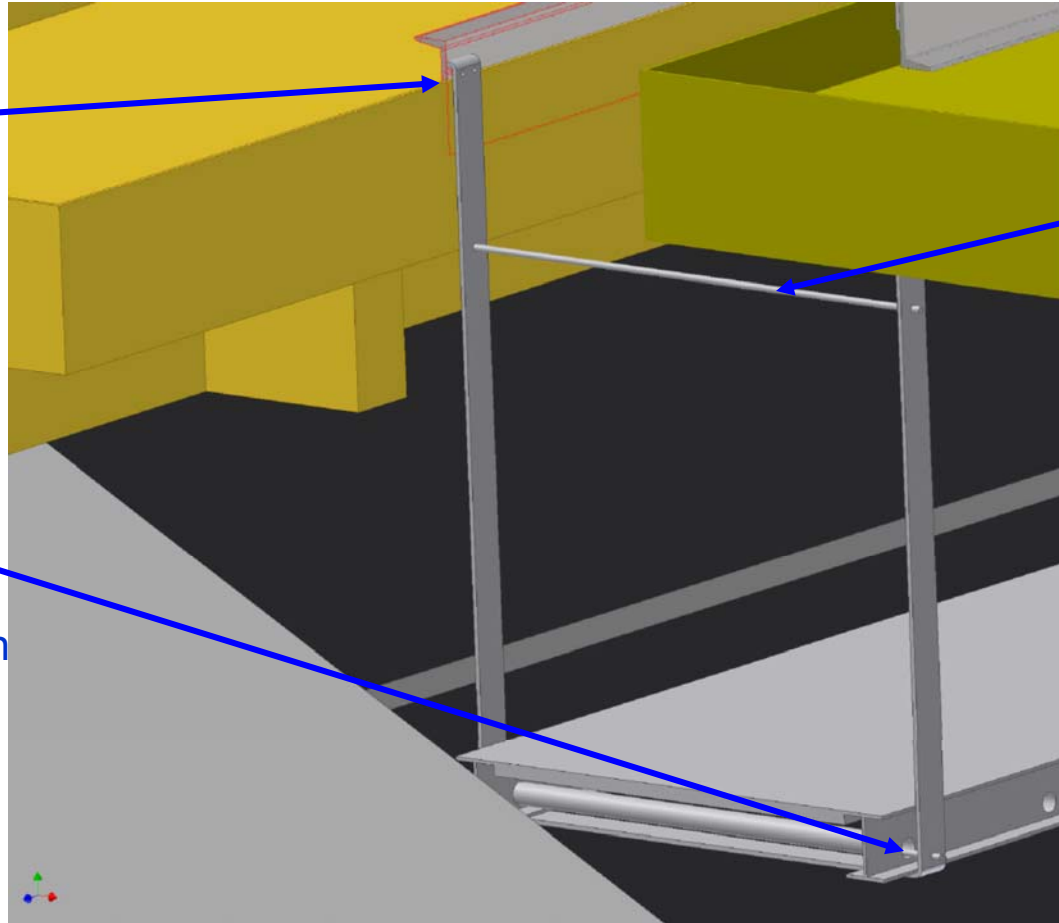
# MuTr Octant 3 Sector 3 Access Platform



# MuTr Octant 3 Sector 3 Access Platform

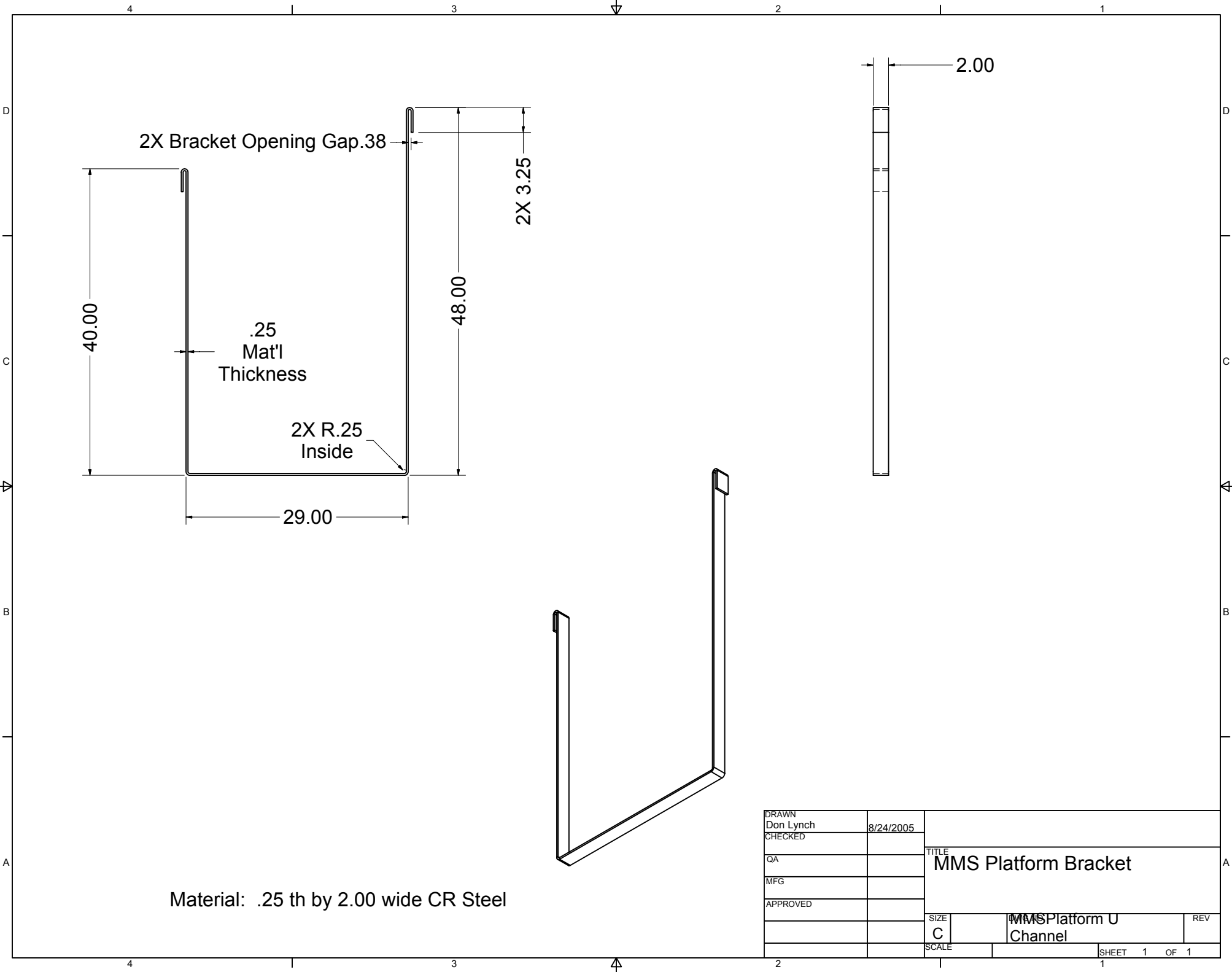
Straps are attached to Channel with bolts above the toe plate to transfer the load to the channels

Steel straps trap platform through existing holes in platform with threaded rod.



Threaded rod attached to steel straps at either end of platform to stiffen against swaying and form barriers against travelling beyond the straps at either end





DRAWN Don Lynch	8/24/2005	TITLE MMS Platform Bracket	
CHECKED			
QA			
MFG			
APPROVED		MMS Platform U Channel	
		SIZE C	REV
		SCALE	SHEET 1 OF 1